(July 2000)

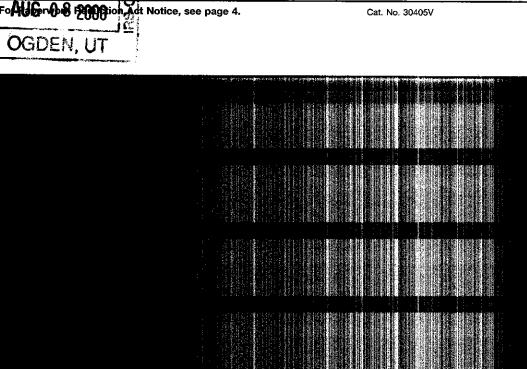
OGDEN, UT

Political Organization Notice of Section 527 Status

OMB No. 1545-1693

Form **8871** (7-2000)

Part General Information Name of organization Employer identification number 59 2217012 **IMPACT** Mailing address (P.O. Box or number, street, and room or suite number) PO Box 12001 City or town, state, and ZIP code Tallahassee, FL 32317-2001 E-mail address of organization N/A 4a Name of custodian of records 4b Custodian's address 3159 Shamrock South S. James Brainerd, AAI, CAE, Esq. Tallahassee, FL 32308 Name of contact person 5b Contact person's address 3159 Shamrock South S. James Brainerd, AAI, CAE, Esq. Tallahassee, FL 32308 Business address of organization (if different from mailing address shown above). Number, street, and room or suite number 3159 Shamrock South City or town, state, and ZIP code Tallahassee, FL 32308 Part II Purpose Describe the purpose of the organization The purpose of the organization is to back those legislators and candidates who are supportive of insurance agents and the independent agency system. Part III List of All Related Entities (see instructions) 8a Name of related entity 8b Relationship 8c Address 3159 Shamrock South FI. Assoc. of Insurance Agents Connected Tallahassee, FL 32308 PO Box 12001 **FAIAPAC** Connected Tallahassee, FL 32317-2001 REJEIVED



Part IV List of All Officers, D	irectors, and Highly C	ompensated Employees (see instructions)
9a Name	9b Title	9c Address
Jill K. Łevy, AAI, CIC	President	1111 Park Centre Blvd Ste 222 Miami, FL 33169-5368
Mark W. Sehnert	Vice President	PO Box 536458 Orlando, FL 32853-6458
Samuel B. Rogers, Sr.	Secretary/Treasurer	PO Box 12099
Charles W. Bovay, CPCU	Director	Tallahassee, FL 32317-2099 2402 Newport Ave
Richard C. Brown	Director	Lakeland, FL 33803 PO Box 265129
Daniel G. Dannenhauer, CPCU	Director	Daytona Beach, FL 32126-5129 PO Box 6188
		Ft. Myers, FL 33911-6188
Gregory A. DeLoach, CPCU, ARM	Director	PO Box 749
		Tallahassee, FL 32302-0749
Thomas W. Donovan, Jr., CPCU	Director	PO Box 24960
		Jacksonville, FL 32241-4960
Alice B. Fielding	Director	PO Box 10579 Jacksonville, FL 32241-4960
Harry B. Forehand, Jr.	Director	PO Box 25598 Tampa, FL 33622-5598
William D. Gunter, Jr.	Director	PO Box 12099
		Tallahassee, FL 32317-2099
J. Howard Hall	Director	PO Box 357400
		Gainesville, FL 32635-7400

Under penalties of perjury, I declare that the organization named in Part I is to be treated as an organization described in section 527 of the Internal Revenue Code, and that I have examined this notice, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.

Sign Here

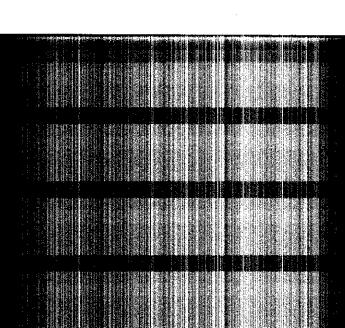
Signature of authorized official

Date



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Form **8871** (7-2000)



1 0111 867 1 (7-2000)		Page 2
Part IV List of All Officers, 9a Name	Directors, and Hig	ghly Compensated Employees (see instructions)
9a Name	9b Title	9c Address
Arturo F. Hoyo	Director	PO Box 661660
	Director	Miami Springs, FL 33266
Clyde H. Long, Jr., AAI	Director	PO Box 14958
		Clearwater, FL 34629-4958
E. Lee Magaha, Jr., CPCU, AAI	Director	PO Box 711
		Pensacola, FL 32593-0711
Ted R. Ostrander, Jr., AAI, CIC	Director	PO Box 490690
	Director	Leesburg, FL 34749-0690
Richard A. Pace	Director	PO Box 940906
	Director	Maitland, FL 32794-0906
Jerry Lee Parker, Sr.	Director	PO Box 1328
	Director	Crestview, FL 32536-1328
H. Paul Senft, Jr.	Director	PO Box 157
		Haines City, FL 33845-0157
Alex Soto, CPCU, ARM	Director	PO Box 561567
	Difector	Miami, FL 33256-1567
Larry B. Stowe	Director	2222 Ponce De Leon Blvd 4th Floor
		Coral Gables, FL 33134-5039
James S. Taintor, III, CPCU	Director	PO Box 450549
		Miami, FL 33245-0549
Gene Waddell	Director	645 Beachland Blvd Ste 3
		Vero Beach, FL 32963
Leon M. Weekes	Director	PO Box 1460
		Delray Beach, FL 33447-1460

Under penalties of perjury, I declare that the organization named in Part I is to be treated as an organization described in section 527 of the Internal Revenue Code, and that I have examined this notice, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.

Sign Here

Signature of authorized official

Date



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Form **8871** (7-2000)

Part IV List of All Officers, D	9b Title	compensated Employees (see instructions)
a Name	an thie	9c Address
S. James Brainerd, AAI, CAE, Esq.	Fund Administrator	3159 Shamrock South
		Tallahassee, FL 32308
	<u> </u>	
		<u> </u>
Under penalties of perjury, I decl	are that the organization named	in Part I is to be treated as an organization described in section 527 of the Integranding schedules and statements, and to the best of my knowledge and be
it is true, correct, and complete.		A statements, and to the best of my knowledge and the best of my knowledge and the statements are the statements.
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Signature of authorized of	IVERED	0/3/2000